(Amended Fe	bruary 20, 1952)	PUBLIC VO	OUCHER FOR PUR ESOTAER THAN			1041110	·	r 	
U. S	COST RE		au, or establishment)				PAI	D BY	
Voucher men	ared at				· 				,
						CADI	66	44	
THE UNITED S	STATES, Dr.,	Payee's	Account No. 10	3.7		COP	_	3	
To		(Paye				. 4—			
•									
	(Ad	dress)	(City)	(Stat	se)				
No. and Date of Order	Date of Delivery or Service	(Enter description, item	ICLES OR SERVICES n number of contract or F er information deemed no	ederal supp ecessary)	QUANTITY -	- Cost	PRICE Per	AMOUNT Dollars	Cts.
		Costs						12,351	53
	1	COBUS							
				٠					
PAYMENT:						,			
Complete						4,			1
Partial		Lies contin	nuation sheet(s) if necessar	v					
Shipped from		to Wei		ernment B/l			Total	\$12,351	5
	above bill is correct	ct and just and that payment	t has not been received.		(Payee must NO				
	STATINTL	(Sign original only)		I	Differences		•••••		
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Date 5/								78 37	
				ľ	Amount verified;		1	12,357	U
Per		Date	Reg. No.		(Signature or init		nvoice Rec'	 d.	
	Alol							STATIN	TI.
Pursuant to author	ority vested in me,	I certify that this account is	correct and proper for pa	yment.		16	15/21	OTATIN	۱L
† Appr			elou.	† -	учупога	ou Jertify	ing Officer)	,	
Ву		(17)		Title	U				
CONTRA	ACTING OFF	ICER	ONLY	_					
Title		S	STATINIT	Date					
	THE REVERSE OF T	THIS FORM MUST BE EXECUTED WHE	EN PURCHASES ARE MADE OR SE	RVICES SECUR	ED WITHOUT WRITTEN A	GREEMENT	IN ANY FORM	<u> </u>	
	ACCOU	UNTING CLASSIFICATION	(Appropriation Symbol m	ust be show	vn; other classificat	ion optio	nal)		
									
			STAT	ΓINTL					
APPROVING	G OFFICER	/1							
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APPROVING	G OFFICER	U							
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	G OFFICER	dated	, 19, for \$			on T	reasurer of	the United Stat	es in
	No					\ favor	r of payee n	the United Stat amed above.	es in
Paid by Check	No	datedon	, 19	Payee		favoi	r of payee n	the United Stat	es ir

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	DIVI	ISIONA	L DETA	IL ACC	UNTS PAID	JOURNAL	DIVISIONAL SUMMARY ACCOU	NTS PAID JOURNAL	+		DATED ACCOUNTS PA	D DISTI	RIBUTION	HARGE D	ETRIR	IITION	REPORT N	10.
_		CENT	-		DATE	CHECK NUMBER	PAYEE'S (ABBREV.	NAME	PL	JRCHASE ORDER OR INVOICE NUMBER	RECEIVING REPORT NUMBER	C.E. CODE	ACCOUNT	M.J.O.	s.o.	WORK ORDER	_	ISTRIBUTION AMOUNT
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